

Town of North Greenbush 2023 Summer Program Registration Form

Camp Dates: July 3rd – August 11th 9 am – 3 pm

Please print and mail this completed form with immunization form & check payments to: Town of North Greenbush Summer Camp, 2 Douglas Street, Wynantskill, NY 12198. Applications MUST be accompanied with payment & immunization forms (Fees are on the next page) Please make all personal & bank checks payable to: The Town of North Greenbush

NO REFUNDS

If you have any questions about summer camp, please call the office M-F from 8:30 am – 3:30 pm, 518-283-2574, (or ext. 15) to speak to Tammie

Please **LIKE** us on **FACEBOOK** for updates at: **TOWN OF NORTH GREENBUSH SUMMER CAMP**
MUST BE RECEIVED BY TUESDAY JUNE 25th OR A \$25.00 LATE FEE WILL APPLY

Medical Concerns: Please be advised that all medical concerns, including allergies (food, meds, insect, etc..) and behavioral, developmental, and health problems (asthma, diabetes) must be reported even if your child is not currently taking medications. This will help us create a more enjoyable experience for your camper.

Does your child have a behavior plan: Yes: ___ No: ___ If yes, please submit a copy to the Medical Director.

IT IS VITAL that you please list medical concerns here (or attach on separate sheet):

Participant Last Name: _____ First Name: _____

Male or Female (circle one) DOB: ___/___/___ Age (at start of program): _____

School: _____ Grade Entering: _____

Home Address: _____ City/Town: _____ Zip Code: _____

Parent/Guardian First & Last Name: _____

Home Phone #: _____ E-Mail: _____

Phone Numbers During Camp Hrs: (1) _____ (2) _____

Alternative Emergency Contact Information: If the Youth Department cannot reach you at the above contact numbers, then whom shall we contact?

Full Name: _____ Home Phone #: _____ Alt. Phone #: _____

Relationship: _____

Photographs will be taken during the summer camp for the purpose of our camp newsletter. If you do not want your child to be included in any photographs, please complete the following:

I do not want my child, _____ to be photographed or on Facebook during this Camp Program.
Signature: _____

Office Use	
Grade Entering	
Fee Paid	
Immunization Record Forms	
Resident/ Non-Resident	
Bus – AM	
Bus – PM	

The Summer Camp will also be traveling for field trips as indicated on the Camp Schedule that will soon be posted on our website on the Youth page. All field trips are included in the registration fee unless otherwise noted.

If your child attends camp on a field trip day, he/she will attend that trip. If you do not want your child to attend a trip, then he/she should not attend camp on that day.



PLEASE SEND LUNCH, DRINKS & SNACKS with your child each day. Due to Construction of a new building, THERE WILL NOT BE A CONCESSION STAND THIS YEAR. NO money \$ should be send to camp with your child.

Day Camp Registration Fees: (make checks payable to: The Town of North Greenbush)

Prices are the same as last year – no price increase this year

Town Residents: \$650.00 per child; \$450.00 for each additional child

Non-Residents: \$850.00 per child; \$550.00 for each additional child

Please mail in the completed application(s) along with immunization forms & a check payment. Immunization forms may be faxed (from dr. office) to: 518-286-2261. We cannot accept registrations without immunizations.

PLEASE pay by Personal or certified bank CHECK. This is preferred but EXACT cash will be accepted . Unfortunately, we do not accept credit/debit cards.

Immunization Forms: As per the Health Department regulations, immunization forms must be updated **every year**, even if there are no changes. Please attach records to this application. Participants whose records are not received upon the start of camp, will **NOT** be able to attend until records are received.

THIS PART MUST BE FILLED OUT:

Also, please fill out the Camper Pick Up Sheet attached →

Please put a check mark where your child will be picked up and dropped off. If none of these spots are convenient for you, you may drop your child off at camp between 8:45 & 9:15 a.m. and pick them up between 2:45 & 3:00. Due to the lack bus drivers available to drive, the buses will not be able to go up & down the streets as they have in the past. We thank you for your patience & understanding. Please be at the morning bus stop by 8:30 am at the latest. At the end of the day, buses leave camp by 3:00 pm.

If you are not dropping off or picking up your child at camp, you must be at these stops promptly!

Town Hall _____ St. Judes School Parking Lot _____ Williams Roads/Twin Town Field _____

Hope Lutheran Church on Winter St./Bloomingrove Dr. _____ Belltop School _____

Shop Rite Plaza (Van Rensselaer Square) at Gazebo by Wendys Drive Thru Entrance _____

I'm Dropping child(ren) off & picking up at camp _____

Child's Physician: _____

Physician's Phone #: _____

Insurance Provider: _____

In the event of an emergency, your child(ren) will be transported to the nearest medical facility possible. Please read and sign below: In the event that I cannot be reached, I give permission for my child(ren) to be given medical treatment:

Parent/Guardian Signature: _____ Date: __/__/__

Please confirm that all information on this form is correct:

Signature: _____ Date: __/__/__

Camper Pick-Up Sheet

The names that you list below are the ONLY people that will be allowed to pick up your child from camp for ANY reason.

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: _____

I give my permission for the following individuals to pick my child up from camp:
(Please print)

1. _____
2. _____
3. _____
4. _____
5. _____